


U.S. APPLICATION NO. (if known, see 37 C.F.R. 1.5)		INTERNATIONAL APPLICATION NO. PCT/US2005/000004		ATTORNEY'S DOCKET NUMBER X-15766	
19.	X	The following fees are submitted:		CALCULATIONS PTO USE ONLY	
(a)	Basic national fee (37 CFR 1.492(a)).....\$300.00		\$ 300.00		
(b)	Examination fee (37 CFR 1.492(c)) If the written opinion prepared by ISA/US or the international preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4).....\$0 All other situations.....\$200				
(c)	Search fee (37 CFR 1.492(b)) If the written opinion of the ISA/US or the International preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4).....\$0 Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority.....\$100 International Search Report prepared by an ISA other than the US and provided to the Office or previously communicated to the US by the IB.....\$400 All other situations.....\$500				
TOTAL AMOUNT (a + b + c) =			\$ 900.00		
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).			\$		
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	10 -20=		X \$50.00	\$	
Independent claims	1 -3=		X \$200.00	\$	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360.00	\$	
TOTAL OF ABOVE CALCULATIONS =			\$		
Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity Statement must also be filed (Note 37 CFR 1.9, 1.27, 1.28).			\$		
SUBTOTAL =			\$ 900.00		
Processing fee of \$130.00 for furnishing English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).			\$		
TOTAL NATIONAL FEE =			\$ 900.00		
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31).			\$		
TOTAL FEES ENCLOSED =			\$ 900.00		
				Amount to be refunded	\$
				charged	\$
a.	<input type="checkbox"/>	A check in the amount of \$_____ to cover the above fees is enclosed.			
b.	<input checked="" type="checkbox"/>	Please charge my Deposit Account No. 05-0840 in the amount of \$900.00 to cover the above fees. A duplicate copy of this sheet is enclosed.			
c.	<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 05-0840. A duplicate copy of this sheet is enclosed.			
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.					
SEND ALL CORRESPONDENCE TO: ELI LILLY AND COMPANY PATENT DIVISION P.O. BOX 6288 INDIANAPOLIS, INDIANA 46206-6288			<div style="text-align: center;">  25885 PATENT TRADEMARK OFFICE </div>		
June 13, 2006 DATE 57,909 REGISTRATION NUMBER			<div style="text-align: center;"> /Tonya L. Combs/ SIGNATURE Tonya L. Combs 317-651-1266 TELEPHONE NUMBER </div>		